STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

-COVER-PAGE

Please type or print in ink.		<i>የኤሮኔ ልማ</i> ዜ ዳ ጨ ቆጣ !!	to a back	
NAME OF FILER (LAST)	(FIRST)	(U10 THK ~ 1	MIDDLE)	
Jones	Christopher	2441 a	Lynn	
1. Office, Agency, or Court			TUREVALEME CHARCES	
Agency Name (Do not use acronyms)		A PARTY STORY		
CA Dept. of Conservation				
Division, Board, Department, District, if applicable		Your Position		
Division of Oil, Gas, and Geothermal Re-	sources	Senior Oil & Gas Engin	eer	
▶ If filing for multiple positions, list below or on an at	tachment. (Do not use a	cronyms)		
Agency:		Position:		
2. Jurisdiction of Office (Check at least one I	oox)			
X State	,	☐ Judge or Court Commissione	r (Statewide Jurisdiction)	
		_	•	
Multi-County		·	- Andrews Andrews	
City of	,	Other		
3. Type of Statement (Check at least one box)				
Annual: The period covered is January 1, 2017, December 31, 2017.	through	Leaving Office: Date Left . (Check one)		
The period covered is/	, through	 The period covered is Jaleaving office. 	anuary 1, 2017, through the date of	
Assuming Office: Date assumed/	<i>J</i>	**		
Candidate: Date of Election	and office sought, if	different than Part 1:		
4. Schedule Summary (must complete)	► Total number o	f pages including this cove	r page;	
Schedules attached		, pangas arramang arra sasa		
Schedule A-1 - Investments – schedule attac	hed 🗆 S	Schedule C - Income Loans & Bus	siness Positions – schedule attached	
Schedule A-2 - Investments – schedule attac		Schedule D - Income - Gifts - sche		
Schedule B - Real Property – schedule attac		Schedule E - Income - Gifts - Trav		
-or-				
✓ None - No reportable interests on any	schedule			
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE	
4800 Stockdale Highway, Suite 100	Bakersfi	eld CA	93309	
DAYTIME TELEPHONE NUMBER		-MAIL ADDRESS		
(661) 334-4605	c	chris.jones@conservation.ca.gov		
I have used all reasonable diligence in preparing this herein and in any attached schedules is true and cor			my knowledge the information contained	
I certify under penalty of perjury under the laws of	of the State of California	that the foregoing is true and co	orrect.	
Date Signed 2/28/2018	Sign	nature Christoph	uf four	
(month, day, year)		(File the originally signe	d statement with your filing official.)	